

Reaching Home: Canada's Homelessness Strategy
Community Homelessness Report

Regional Municipality of Waterloo
2025-2026

TEMPLATE FOR COMMUNITIES

SECTION 1: COMMUNITY CONTEXT

Overview

CHR 1

Highlight any efforts and/or issues related to the work that your community has done to **prevent and/or reduce homelessness** and **improve access to safe, appropriate housing** over the last year.

Your response could include information about:

- Homelessness prevention and shelter diversion efforts;
- Housing move-ins;
- New investments in housing, subsidies and/or supports;
- Changes to investments in Housing First to respond to emerging needs, identifying the current percentage of Reaching Home funding allocated to this programming;
- Gaps in services;
- Efforts to support community capacity and/or innovation;
- Collaboration with other sectors;
- Efforts to address homelessness for specific groups (e.g., youth); and/or,
- Efforts to meet Reaching Home minimum requirements.

Our community continues to work to improve all aspects our system's functioning, while recognizing challenges still remain.

Our community's work to prevent experiences of homelessness continues to find success. In 2025/26, our community supported 561 households to remain housed through arrears repayment support. Our prevention efforts have

continued to expand through the establishment of a permanent eviction prevention team (formerly a pilot program) as well as prevention-focused rental supplements through the Plan to End Chronic Homelessness. Both of those initiatives have specific focuses for partners involved to ensure equity-seeking groups receive appropriate access to supports, as well as taking into account geographic disparities in service in our Region.

Our centralized diversion and coordination entry into shelters team has also expanded their work into shelter settings, having staff reconnect with people referred to shelter to follow-up on diversion conversations with the aim of resolving experiencing of homelessness as quickly as possible.

The local rent fund remains a strong lever to support housing move-ins. 731 households were provided funds in 2025/26 to pay last month's rent or make key deposits, supporting 183 exits from homelessness. An upstream rental supplement program rolled out in the year prior has continued to reach individuals who are either homeless or precariously housed to retain or find new housing and prevent inflow into our shelter system. Seeing the demand for move-related funds, our community also created a fund to support all outreach and shelter partners to fund transitions to housing, paying for new furniture and housing essentials for individuals transitioning out of homelessness. Our community has also prioritized the use of rental supplements through the Canada-Ontario Housing Benefit for individuals experiencing unsheltered homelessness to move into housing.

Existing system structures continue to adapt and flex to new realities of homelessness in our communities and continue to produce results. In the past year, the prioritization of individuals experiencing chronic homelessness has led to 133 housing move-ins for this sub-population. 430 households previously experiencing chronic homelessness have been supported to maintain scattered-site supportive housing, programs with a housing retention rate above 90%. Our family-serving system has supported 79 families to find permanent housing after experiencing homelessness and has successfully diverted 343 families from needing to access shelter. Our community continues to recognize the need for additional rental supplements to bridge income gaps to the rental market and continues to invest in permanent housing solutions for individuals experiencing homelessness in our community.

Our Housing Stability System has also expanded, with multiple new programs opening this year. After extensive renovations, a new 66-bed transitional housing site for female-identifying individuals opened at the site of a former shelter, providing shelter and programming for individuals to stabilize after long experiences of homelessness. Another 20-bed transitional housing site also opened locally, operated by a new partner to our system, serving racialized women and families in our community with culturally relevant support.

Our system's involvement with the local Heat, Cold, and Air Quality Partnership continues to inform our work to support people through significant environmental stressors. Over the summer months, dedicated resources are available to support people at most risk during extreme heat and air quality events. During this past winter, our community opened multiple winter warming sites, supporting a significant number of unsheltered individuals to get some reprieve from the elements. This was in addition to funding winter warming supplies that were distributed to individuals unable to access system spaces. With emergency shelters operating at or near capacity regularly, overnight warming spaces and supplies provide critical services as temperatures drop to dangerous levels.

The Plan to End Chronic Homelessness (PECH), a community table of direct service staff, system leaders, non-housing agencies, affiliated sectors leaders, activists, and interest holders continues to work towards system transformation. New working groups were established, aimed at addressing the unique needs and pressures of addressing inflow to, active, and outflow from homelessness. A community-driven budgeting process was piloted, allowing organizations to identify gaps and needs and propose funding solutions that were then voted on by PECH members monthly to allot funds. A change in leadership early in the year has slowed progress and paused some of

the work with the aim of solidifying governance structures and renewing momentum as soon as possible.

Our community continues to work on improving the data used to understand, assess, and create impacts in our work to end homelessness. A shift to using HIFIS's coordinated access module as a primary source of information for our system has led to a shift in how we are understanding the scope of the challenge. This is a positive shift in data collection and reporting processes as we focus on improving data quality. Our community also worked closely with CAEH (Canadian Alliance to End Homelessness) to have our community confirm Quality By-Name Data, and Quality Veteran By-Name Data, important milestones to ensure a strong foundation for continued system improvement. Our system has also begun collecting identity-based demographic information with a new HIFIS update, which will enable us to track and begin reporting outcomes based on these characteristics. We expect to be able to begin to identify trends for engagement, service use, and outcomes in our community in the coming year.

Our work with other sectors remains a challenge though steady progress continues to be made. Partners in income support areas for Ontario Works have begun establishing teams of staff to more directly support people experiencing homelessness and in supportive and affordable housing. These outreach staff will connect with individuals alongside local housing staff to ensure someone is in receipt of appropriate income support and have proven very helpful in preventing evictions. Connections to the family and children's services sector are also being strengthened with significant overlap in priorities being identified. Housing instability is a significant driver of child welfare involvement and coordinated use of rental supplements to mitigate family separation has proven successful so far.

Our community has also seen the creation of the new Homelessness and Addiction Recovery Treatment (HART) Hub, a central site with a wide-range of medical supports as well as an outreach team to connect people experiencing homelessness with those services. This includes a partnership with a local housing agency to provide 12-beds of abstinence-based transitional housing. Local emergency shelters continue to partner with health agencies to support individuals accessing services to get needed health services. Also, a new partnership between local housing and outreach partners, the Canadian Mental Health Association (CMHA), and the corrections system has begun to support people transitioning out of prison back into supports within the community.

Gaps and challenges in service remain for our system, including spaces where people experiencing homelessness

can be supported with their pets, where couples can be supported together, and with system coordination amongst partners. Some of these are addressed with some limited service options available, though they are often either very expensive, or simply inadequate to meet the need.

Our community continues to work on system improvement while continuing the difficult work of supporting people through very challenging times in their lives. This work depends on strong partnerships, incremental change, and dedicated people working to improve the lives of those most vulnerable in our community.

CHR 2

How has the community's approach to addressing homelessness changed with the implementation of Reaching Home?

Communities are strongly encouraged to use the “**Reflecting on the Changing Response to Homelessness**” worksheet to help them reflect on how the approach has changed and the impact of these changes at the local level. Communities are also encouraged to reflect on changes to investments in Housing First over time, where applicable.

Our community continues to strive for strong, coordinated service delivery. Through the completion of the Community Homelessness Report, we continue to evaluate the functioning of our system through the ebb and flow of annual changes within it. The questions help us gauge critical system processes, ensuring access remains consistent across our Region, and engagement with vulnerable populations is prioritized. The outcomes focused approach reinforces the importance of data to measure efficacy of system interventions and enables a view of progress over time.

Collaboration between Indigenous and non-Indigenous partners

Note: It is expected that communities will continuously work to improve collaboration between Indigenous and non-Indigenous partners over time. If your community is working to improve a specific collaboration requirement that had been self-assessed as met in a previous CHR, you should still select “Yes” from the drop-down menu for this CHR.

CHR 3	Please select your community from the drop-down menu:	Waterloo Region (ON)
Your community: Has only DC funding available.		
CHR 4	a) Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of:	
	Implementing, maintaining and/or improving the Coordinated Access system?	Yes (Continuous improvement)
	Implementing, maintaining and/or improving, as well as using the HMIS?	Yes (Continuous improvement)
	Strengthening the Outcomes-Based Approach?	Yes (Continuous improvement)
As a reminder, meaningful collaboration with local Indigenous partners is expected for your community.		

b) When asked whether collaboration occurred, under **CHR 4(a)**, you answered Yes (Continuous improvement) or No (Under development) to **at least one** of the following: Coordinated Access, the HMIS and/or the Outcomes-Based Approach. As a follow up to this, please indicate **if any** of the following activities took place:

- Your community has established processes (formal or informal) for engaging with Indigenous partners on issues related to Coordinated Access and/or the HMIS.

→ Coordinated Access:

Yes

→ HMIS:

Yes

- Indigenous partners have roles and responsibilities related to governance for the Coordinated Access system and/or the HMIS throughout the lifecycle of these systems (implementation, maintenance and improvement).

→ Coordinated Access:

No

→ HMIS:

No

- Indigenous partners participate in Coordinated Access:

Yes

- Indigenous partners actively use the HMIS:

Yes

- Indigenous partners have access to HMIS data and reports:

Yes

- Indigenous partners participate in the Outcomes-Based Approach:

Yes

Note: As applicable, these activities should be described in further detail in CHR 4(c). This list is not meant to be exhaustive. Other relevant activities not listed above should be described in CHR 4(c).

c) When asked whether collaboration occurred, under **CHR 4(a)**, you answered Yes (Continuous improvement) or No (Under development) to **at least one** of the following: Coordinated Access, the HMIS and/or the Outcomes-Based Approach. As a follow up to this, please describe the collaboration that took place in more detail.

Your response should include when collaboration with Indigenous partners occurred, who it was with, what it involved, and how Indigenous perspectives influenced outcomes.

Our community continues to regularly engage with our Indigenous partners to support Indigenous community members experiencing homelessness and housing precarity. Regular meetings occur throughout the year with the Healing of the Seven Generations leadership and outreach staff, as well as staff and leadership from Crow Shield Lodge and K-W Urban Native Wigwam Project. Discussions touch on what coordinated support looks like, how to ensure resources are available when needed, the focus on and value of collecting and sharing data in this work, and any successes or challenges. Collaboration with Crow Shield Lodge has focused on Indigenous circles and healing amongst staff and participants within the Emergency Shelter and Housing Stability System. With K-W Urban Native Wigwam Project, meetings have focused on providing additional support to a new affordable housing build they operate, including support with adequately resourcing the site, tenant support, and successes or challenges. Our community is committed to continuing to engage and support Indigenous housing organizations to support their community members in a way that is culturally appropriate and determined by those organizations and individuals.

CHR 5

a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the local Indigenous partners, including those that sit on your CAB?

No

As a reminder, meaningful collaboration on the CHR with local Indigenous partners is expected for your community.

d) When asked whether collaboration occurred related to the completion of the CHR, under **CHR 5(a)**, you answered No. As a follow up to this, please answer this two part question:

i) Please describe why collaboration did not take place in more detail.

Collaboration on completing the CHR did not occur this year due as other operational priorities and emergent challenges required more attention. Our focus has remained on building relationships, trust, and to support our Indigenous partners to be full partners in this work. We have been having conversations about priority areas (e.g. data, supports to maintain housing stability) and meaningful engagement in day-to-day operations and local Indigenous calls to action, we have not focused on meaningful collaboration on reporting through the CHR.

ii) Please describe what the plan is to ensure meaningful collaboration occurs **during next year's CHR process**. Your response should include when collaboration with Indigenous partners will occur, who it will take place with and what the it will involve.

In the coming year, we will continue to prioritize conversations about important work areas, including coordinated access, HMIS, and outcomes, and will endeavour to have more fulsome conversations with respect to relevant CHR topic areas, to build understanding of the relevance of the report as well as the applicability it has to ongoing operational work.

End of Section 1

SECTION 2: COORDINATED ACCESS SELF-ASSESSMENT

Note: It is expected that communities will continuously work to improve their Coordinated Access system over time. If your community is working to improve a specific Coordinated Access requirement that had been self-assessed as met in a previous CHR, you should still select “Yes” from the drop-down menu for this CHR.

Governance and Partnerships

Note: For communities that receive both Designated Communities (DC) and Indigenous Homelessness (IH) funding, this section is specific to the **DC Community Advisory Board (CAB)**.

CA 1	Communities must maintain an integrated, community-based governance structure that supports a transparent, accountable and responsive Coordinated Access system, with use of an HMIS. The CAB must be represented in this structure in some way.		
	<table><tr><td data-bbox="315 893 1522 1039">a) Is an integrated, community-based governance structure in place that supports a transparent, accountable and responsive Coordinated Access system and use of the local HMIS?</td><td data-bbox="1522 893 1992 1039">Yes</td></tr></table>	a) Is an integrated, community-based governance structure in place that supports a transparent, accountable and responsive Coordinated Access system and use of the local HMIS?	Yes
a) Is an integrated, community-based governance structure in place that supports a transparent, accountable and responsive Coordinated Access system and use of the local HMIS?	Yes		
	<table><tr><td data-bbox="315 1039 1522 1169">b) Have Terms of Reference for the integrated, community-based governance structure been documented and, if requested, can they be made publicly available?</td><td data-bbox="1522 1039 1992 1169">Yes</td></tr></table>	b) Have Terms of Reference for the integrated, community-based governance structure been documented and, if requested, can they be made publicly available?	Yes
b) Have Terms of Reference for the integrated, community-based governance structure been documented and, if requested, can they be made publicly available?	Yes		
CA 2	Does the integrated governance structure that supports Coordinated Access and use of HMIS include representation from the following: Federal Homelessness Roles:		

→ Community Entity:	Yes – as a CAB member with ex-officio status and a member of the overall governance structure
→ Community Advisory Board:	Yes
→ Housing, Infrastructure and Communities Canada (HICC):	Yes – as a CAB member with ex-officio status
→ Organization that fulfills the role of Coordinated Access Lead:	Yes
→ Organization that fulfills the role of HMIS Lead:	Yes
• Homelessness roles from other orders of government:	
→ Provincial or territorial government:	Yes – as a CAB member and a member of the overall governance structure
→ Local designation(s) relative to managing provincial or territorial homelessness funding, as applicable (e.g., Service Manager in Ontario):	Yes
→ Municipal government:	Yes – as a CAB member and a member of the overall governance structure
→ Local designation(s) relative to managing municipal homelessness funding, as applicable:	Yes
• Local groups with a mandate to prevent and/or reduce homelessness, as applicable:	Yes

	Local Indigenous partners:	Yes – as a CAB member and a member of the overall governance structure
	Population groups the Coordinated Access system intends to serve (e.g., providers serving youth experiencing homelessness):	Yes – as a CAB member and a member of the overall governance structure
	Types of service providers that help prevent homelessness and those that help people transition from homelessness to safe, appropriate housing in the community:	Yes – as a CAB member and a member of the overall governance structure
	People with lived experience of homelessness:	Yes
CA 3	Is there a document that identifies how various homeless-serving sector roles and groups are integrated and aligned in support of the community's overall goals to prevent and reduce homelessness and, if requested, can this documentation be made publicly available? At minimum, the following roles and groups must be included: - Community Entity; - Community Advisory Board; - Coordinated Access Lead and HMIS Lead; - Provincial or territorial and municipal designations relative to managing homelessness funding, as applicable; - Local groups with a mandate to prevent and/or reduce homelessness, as applicable; and, - Local Indigenous partners.	Yes
CA 4	a) Has a Coordinated Access Lead organization been identified?	Yes
	b) Has an HMIS Lead organization been identified?	Yes

	c) Do the Coordinated Access Lead and HMIS Lead collaborate to: • Improve service coordination and data management; and, • Increase the quality and use of data to prevent and reduce homelessness?	Yes
	d) Have Coordinated Access Lead and HMIS Lead roles and responsibilities been documented and, if requested, can this documentation be made publicly available?	Yes
CA 5	Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of implementing, maintaining and/or improving the Coordinated Access system? Note: The response to this question is auto-populated from CHR 4(a).	Yes (Continuous improvement)
CA 6	a) Consider the CAB expectations outlined below. Is the CAB currently fulfilling expectations related to its role with addressing homelessness in the community? Background: The Reaching Home Directives outline expectations specific to the CAB and its role with addressing homelessness in the community. These expectations are summarized below under four roles. Community-Based Leadership: To support its role, collectively, the CAB: • Is representative of the community; • Has a comprehensive understanding of the local homelessness priorities in the community; and, • Has in-depth knowledge of the key sectors and systems that affect local priorities. Planning: • In partnership with the Community Entity, the CAB gathers all available information related to local homelessness needs in order to set direction and priorities, understand what is working and what is not, and develop a coordinated approach to meet local priorities.	Yes

- The CAB helps to guide investment planning, including developing the Reaching Home Community Plan and providing official approval, as well as assessing and recommending projects for Reaching Home funding to the Community Entity.

Implementation and Reporting:

- The CAB engages in meaningful collaboration with key partners, including other orders of government, Indigenous partners, as well as entities that coordinate provincial or territorial homelessness initiatives at the local level, where applicable.
- The CAB coordinates efforts to address homelessness at the community level by supporting the Community Entity to implement, maintain, and improve the Coordinated Access system, actively use the local HMIS, as well as prevent and reduce homelessness using an Outcomes-Based Approach.
- The CAB approves the Reaching Home Community Homelessness Report.

Alignment of Investments:

- CAB members from various orders of government support alignment in investments (e.g., they share information on existing policies and programs, as well as updates on funding opportunities and funded projects).
- CAB members provide guidance to ensure federal investments complement existing policies and programs.

CA 7

Are the following CAB documents being maintained **and** are they available upon request?

- Terms of Reference.

Yes

- Engagement strategy that explains how the CAB intends to:

Yes

- Achieve broad and inclusive representation;
Coordinate partnerships with the necessary sectors and
- systems to meet its priorities (e.g., beyond the homeless-serving sector); and,
- Integrate local efforts with those of the province or territory.

- Procedures for addressing real and/or perceived conflicts of interest (e.g., members recuse themselves when they have ties to proposed projects), including the membership of elected municipal officials.

Yes

- Procedures for assessing and recommending project proposals for federal funding under Reaching Home (e.g., supporting a fair, equitable, and transparent assessment process as set out by the Community Entity).

Yes

- Exclusive and shared responsibilities between the CAB and Community Entity.

Yes

- Membership terms and conditions, including:

Yes

- Recruitment processes;
- Length of tenure;
- Attendance requirements;
- Delegated tasks; and,

Having at least two seats available for the alternate Community → Entity and CAB/Regional Advisory Board (RAB) member, where applicable.		
CA 8	a) Do all service providers receiving funding under the Designated Communities (DC) or Territorial Homelessness (TH) stream participate in the Coordinated Access system?	Yes
	b) Has participation in the Coordinated Access system been encouraged from providers that serve people experiencing or at-risk of homelessness, and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes
	c) Has participation been encouraged from providers that could fill vacancies through the Coordinated Access system (e.g., they have housing units, subsidies and/or supports that could be accessed by people experiencing homelessness), and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes
Systems Map and Resource Inventory		
CA 9	a) A systems map identifies and describes the service providers that participate in the Coordinated Access system. Does the community have a current systems map and , if requested, can it be made publicly available?	Yes
	b) Does the systems map include the following elements:	
	→ Name of the organization and/or service provider:	Yes
	→ Type of service provider (e.g., emergency shelter, supportive housing):	Yes

	→ Funding source(s):	Yes
	→ Eligibility for service (e.g., youth):	Yes
	→ Capacity to serve (e.g., number of units):	Yes
	→ Role in the Coordinated Access system (e.g., access point):	Yes
	→ Role with maintaining quality data used for a Unique Identifier List (e.g., keep data up-to-date for housing history):	Yes
	→ If the service provider currently uses the HMIS:	Yes
c) Over the last year, was the systems map used to guide efforts to improve:		
	→ The Coordinated Access system (e.g., identify opportunities to increase participation):	Yes
	→ Use of the HMIS (e.g., identify opportunities to onboard new service providers):	Yes
	→ Data quality (e.g., increase data comprehensiveness):	Yes
CA 10	a) Are all housing and related resources funded under the DC or TH stream included in the Resource Inventory? This means that they fill vacancies using the Unique Identifier List, following the vacancy matching and referral process.	Yes
	b) For each housing and related resource in the Resource Inventory, have eligibility criteria been documented?	Yes

	c) For each housing and related resource in the Resource Inventory, have prioritization criteria, and the order in which they are applied, been documented and , if requested, can this documentation be made available? At minimum, depth of need (i.e., acuity) must be included as a factor in prioritization.	Yes
Service Navigation and Case Conferencing		
CA 11	a) Are there processes in place to ensure that people are being supported to move through the Coordinated Access process? This is often referred to as service navigation or case conferencing.	Yes
	b) Have these processes been documented and , if requested, can this documentation be made available?	Yes
	c) Do the processes include expectations for the following:	
	→ Helping people to identify and overcome barriers to accessing appropriate services and/or housing and related resources.	Yes
	→ Keeping people's information up-to-date in the HMIS (e.g., interaction with the system, housing history, as well as data used to inform eligibility and prioritization for housing and related resources).	Yes
Access Points to Service		
CA 12	a) Are access points available in some form throughout the geographic area covered by the DC or TH funded region, so that people experiencing or at-risk of homelessness can be served regardless of where they are in the community?	Yes
	b) Have access points been documented and is this information publicly available?	Yes

CA 13	a) Are there processes in place to monitor if there is easy, equitable and low-barrier access to the Coordinated Access system and to respond to any issues that emerge, as appropriate?	Yes
	b) Have these processes been documented and , if requested, can this documentation be made available?	Yes
Initial Triage and more In-Depth Assessment		
CA 14	a) Is the triage and assessment process documented in one or more policies/protocols?	Yes
	b) Does the documented triage and assessment process address the following and, if requested, can the documentation be made available:	
	→ Consents: Ensuring that people have a clear understanding of the Coordinated Access system, as well as how their personal information will be shared and stored. Includes addressing situations where people may benefit from services, but are not able or willing to give their consent.	Yes
	→ Intakes: Documenting that people have connected or reconnected with the Coordinated Access system and have been entered into the HMIS, including obtaining or reconfirming consents, creating or updating client records, and entering transactions in the HMIS.	Yes
	→ Initial triage: Ensuring safety and meeting basic needs (e.g., food and shelter), and guiding people through the process of stopping an eviction (homelessness prevention) or finding somewhere to stay that is safe and appropriate besides shelter (shelter diversion).	Yes

	→ More in-depth assessment: Gathering information to gain a deeper understanding of people's housing-related strengths, depth of need, and preferences, including through the use of a common assessment tool(s) to inform prioritization for vacancies in the Resource Inventory.	Yes
	→ Community referrals: Gathering information to understand what services people are eligible for and identifying where they can go to get their basic needs met, get help with a housing plan and/or connect with other related resources.	Yes
	→ Housing plans: Documenting people's progress with finding and securing housing (with appropriate subsidies and/or supports, as applicable).	Yes
	→ Using a person-centered approach: Tailoring use of common tools to meet the needs and preferences of different people or population groups (e.g., youth), while also maintaining consistency in process across the Coordinated Access system.	Yes
CA 15	a) Is a common, unified triage and assessment process being applied across all population groups in the community and, if requested, can this documentation be made available?	Yes
	b) If more than one triage and/or assessment tool is being used, is there a protocol in place that describes:	
	→ When each tool should be used (e.g., tools used only for youth verses those that can be used with more than one population group).	Yes

	→ When a person/family could be asked to complete more than one tool (e.g., if an individual becomes part of a family or a youth becomes an adult).	Yes
	→ How the matching process will be managed in situations where more than one person/family is eligible for the same vacancy and, because data to inform prioritization was collected using different tools, results are not the same (e.g., one tool gives a higher score for depth of need than the other).	Yes
Vacancy Matching and Referral with Prioritization		
CA 16	a) Is the vacancy matching and referral process documented in one or more policies/protocols?	Yes
	b) Does your documented vacancy matching and referral process address the following:	
	→ Roles and responsibilities: Describing who is responsible for each step of the process, including data management.	Yes
	→ Prioritization: Identifying how prioritization criteria is used to determine an individual or family's relative priority on the Priority List (a subset of the broader Unique Identifier List) when vacancies become available (i.e., how the Priority List is filtered and/or sorted).	Yes
	→ Referrals: What information to cover when referring an individual or family that has been matched and how their choice will be respected, including allowing individuals and families to reject a referral without repercussions.	Yes

	→ Offers: What information to cover when a provider is offering a vacancy to an individual or family that has been matched and tips for making informed decisions about the offer.	Yes
	→ Challenges: How concerns and/or disagreements about prioritization and referrals will be managed, including criteria by which a referral could be rejected by a provider following a match.	Yes
	→ Resource Inventory management: Steps to track real-time capacity, transitions in/out of units, occupancy/caseloads, progress with referrals/offers, and housing outcomes.	Yes
CA 17	Are vacancies from the Resource Inventory filled using a Priority List, following the vacancy matching and referral process?	Yes
Section 2 Summary Tables		
The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the Coordinated Access and CAB Directives .		

Reminder: As per **Coordinated Access Minimum Requirement 1** under the Reaching Home directives, communities must meet all Coordinated Access minimum requirements by March 31, 2026.

	Completed	Started	Not Yet Started
Total	17	0	0

Coordinated Access	Completed (score)	Completed (%)
Governance and partnerships (out of 8 points)	8	100%
System map and Resource Inventory (out of 2 points)	2	100%
Service navigation and case conferencing (out of 1 point)	1	100%
Access points (out of 2 points)	2	100%
Initial triage and more in-depth assessment (out of 2 points)	2	100%
Vacancy matching and referral with prioritization (out of 2 points)	2	100%
All (out of 17 points)	17	100%

End of Section 2

SECTION 3: HOMELESSNESS MANAGEMENT INFORMATION SYSTEM AND OUTCOMES-BASED APPROACH SELF-ASSESSMENT

Context

CHR 7	a) In your community, is the Homeless Individuals and Families Information System (HIFIS) the Homelessness Management Information System (HMIS) that is being used?	Yes

Note: Throughout Section 3 and Section 4 of this CHR, questions that ask about the “HMIS” or the “dataset” refer to the HMIS identified in question CHR 7.

Homelessness Management Information System (HMIS)

HIFIS 1	Is an HMIS being actively used to collect and manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and for the Outcomes-Based Approach? This includes using the HMIS to generate data for the Unique Identifier List and outcome reporting.	Yes
HIFIS 2	a) Are all Reaching Home-funded service providers actively using the same HMIS to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and for the Outcomes-Based Approach?	Yes

	b) Over the last year, were other providers (including those receiving other Reaching Home or federal funding, as well as non-federal funding) that serve people experiencing or at-risk of homelessness encouraged to actively use the HMIS? They may or may not have agreed to do so at this time.	Not Applicable – all service providers already actively use the same HMIS
HIFIS 3	a) Has the Community Entity signed the latest Data Provision Agreement (find the latest version here , which includes the Racial Identity field in the annex) with Housing, Infrastructure and Communities Canada (HICC)? This may have been done in a previous year.	Yes
	b) Are local agreements in place to manage privacy, data sharing and client consent related to the HMIS? These agreements must comply with municipal, provincial/territorial and federal laws and include: • A Community Data Sharing Agreement; and, • A Client Consent Form.	Yes
	c) Are processes in place that ensure there are no unnecessary barriers preventing Indigenous partners from accessing the HMIS data and/or reports they need to help the people they serve?	Yes
HIFIS 4	Has the Community Entity updated HIFIS to the latest version that was most recently confirmed as mandatory by HICC?	Yes
HIFIS 5	Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of implementing, maintaining and/or improving, as well as the use of the HMIS? Note: The response to this question is auto-populated from CHR 4(a).	Yes (Continuous improvement)

Data Uniqueness	
OBA 1	
a) Does the dataset include people currently experiencing homelessness that have interacted with the homeless-serving system?	Yes
b) Do people appear only once in the dataset?	Yes
c) Do people give their consent to be included in the dataset?	Yes
OBA 2	
Is there a written policy/protocol (“Inactivity Policy”) that describes how interaction with the homeless-serving system is documented? The policy/protocol must: • Define what it means to be “active” or “inactive”; • Define what keeps someone “active” (e.g., data entry into specific fields in HIFIS); • Specify the level of effort required by service providers to find people before they become “inactive”; • Explain how to document a person’s first time as “active”, as well as changes in “activity” or “inactivity” over time; and, • Explain how to check for data quality (e.g., run a report that shows the clients that are about to become inactive and work with outreach workers to update their files and keep them active, as needed).	Yes
OBA 3	
Is there a written policy/protocol that describes how housing history is documented (e.g., as part of a broader data entry guide for the HMIS)? The policy/protocol must: • Define what it means to be “homeless” or “housed” (e.g., define a housing continuum that shows which housing types align with a status of “homeless” versus “housed”); • Explain how to enter housing history consistently; and, • Explain how to check for data quality (e.g., run a report that shows the percentage of clients that have complete housing history, so that “unknown” fields can be updated).	Yes
Data Consistency	

OBA 4	To support Coordinated Access, is the HMIS used to generate data for a Unique Identifier List?	Yes
OBA 5	Is the HMIS used to <u>collect data</u> for setting baselines, setting reduction targets and tracking progress for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
Data Timeliness		
OBA 6	Is the dataset updated <u>as soon as</u> new information is available about a person for:	
	→ Interaction with the system (e.g., changes from “active” to “inactive”).	Yes
	→ Housing history (e.g., changes from “homeless” to “housed”).	Yes
	→ Data that is relevant and necessary for Coordinated Access (e.g., data used to determine who is eligible and can be prioritized for a vacancy).	Yes
OBA 7	Is data readily available and accessible, so that it can be used for Coordinated Access, the Outcomes-Based Approach and to drive the prevention and reduction of homelessness more broadly?	Yes

Data Completeness		
OBA 8	Are processes in place to ensure that all relevant and necessary data for filling vacancies is complete? For example, is data used to determine if someone is eligible and can be prioritized for a vacancy complete for each person in the dataset?	Yes
OBA 9	Are processes in place to ensure that data for every person in the dataset is as complete as possible for:	
	→ Interaction with the system:	Yes
	→ Housing history (including data about where people were staying immediately before becoming homeless and, once they've exited, where they went):	Yes
	→ Indigenous identity:	Yes
Data Comprehensiveness		
OBA 10	Does the dataset include all household types (e.g., singles and families experiencing homelessness)?	Yes
OBA 11	Does the dataset include people experiencing sheltered homelessness (e.g., staying in emergency shelters)?	Yes
OBA 12	Does the dataset include people experiencing unsheltered homelessness (e.g., people living in encampments)?	Yes
CHR 9	The following questions aim to help consider other factors that may impact data comprehensiveness. They do not directly assess progress with the minimum requirements.	
	a) Does the dataset include the following household types, as much as possible right now:	

→ Single adults:	Yes
→ Unaccompanied youth:	Yes
→ Families	Yes – All family members including dependents
b) Does the dataset include people staying in the following types of shelter:	
→ Permanent emergency shelter:	Yes
→ Seasonal or temporary emergency shelter:	Yes
→ Hotels/motel stays paid for by a service provider:	Yes
→ Domestic violence shelters:	Not yet
c) Does the dataset include the following groups of people who have interacted with the system:	
→ People that identify as Indigenous:	Yes
→ People as soon as they interact with the system:	Yes – people are added on the first day
→ People experiencing hidden homelessness:	Yes
→ People staying in transitional housing:	Yes

	→ People staying in public institutions who do not have a fixed address (e.g., jail or hospital):	Yes
OBA 13	Under Reaching Home, at minimum, a comprehensive dataset includes all household types (OBA 10), people experiencing sheltered homelessness (OBA 11) and people experiencing unsheltered homelessness (OBA 12), as applicable. Consider your answers to questions OBA 10, OBA 11, OBA 12 and CHR 9. Does the dataset include everyone currently experiencing homelessness that has interacted with the homeless-serving system, as much as possible right now?	Yes
Data Use		
OBA 14	Note: For the purpose of this CHR, the dataset can only be used for monthly reporting if there is at least one full month of data available, and for annual reporting if there is at least one full fiscal year of data available.	
	a) <u>Can the dataset be used to set</u> monthly and annual baselines and reduction targets for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
	b) <u>Is the dataset being used to set</u> monthly and annual baselines and reduction targets for the following community-level outcomes:	

	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
OBA 15	Is data used to <u>inform action</u> related to preventing and reducing homelessness?	Yes
b) How is data being used to inform action? Please provide specific examples. Your response should include: • Examples of how data is used to develop and/or update clear plans of action for reaching your reduction targets; and/or, • Examples of how data is used to inform action in policy-making, program planning, performance management, investment strategies and/or service delivery.		
As a community, we recognize that there is a significant amount of data collected in our homelessness serving system and using that data to inform action and change is one of the strongest ways we can honour its collection. This year we have made an intentional shift towards using data from the coordinated access module, which is helping to capture a more robust reflection of individuals experiencing homelessness in our community. As we continue to focus on using this data set, additional changes to system data operations will be undertaken throughout the year. Using this data, we continue to look at what kinds of system gaps exist and which kinds of interventions are seeming to have more success. Some of this includes: • Continuing to work towards having adequate emergency spaces that reflect the proportion of populations that experience homelessness, including for female-identifying individuals or geographic preferences within the Region • Ongoing investment in scattered-site supportive housing options, with considerations for underserved sub-		

populations and/or significant system pressures.

- Investments in upstream, prevention focused work, including skilled diversion through our coordinated entry, the rent fund, and direct service eviction prevention programs.
- Opening new transitional housing spaces for women, gender diverse, and racialized individuals across our Region.
- Rollout of a new HIFIS version to support the collection of participant demographic data that will inform ongoing system enhancement.
- Using historical data and trends to project data forward to enhance planning and resource allocation.
- Cross-referencing new coordinated access data set with the existing prioritized by-name list (Prioritized Access to Housing Support [PATHS] list) and Point-in-Time (PiT) count data to understand differences between them.
- Identifying gaps in information related to extreme weather responses and being more proactive in defining important, and realistic data points. Also identifying a gap in our ability to identify whether someone is returning specifically to a particular shelter from a housing and how that affects diversion or ongoing support efforts.

CHR
10

The following questions aim to determine how you will report data in Section 4 of your CHR.

a) What is the earliest you can report monthly data in Section 4 of your CHR, inclusively?

March 2020

b) What is the earliest you can report annual data in Section 4 of your CHR, inclusively?

2019-20

c) For 2025-26, did you use the Canadian methodology to report on outcomes in Section 4?

Reminder: By March 31, 2026, all communities are expected to use the Canadian methodology for outcome reporting in their CHR. HIFIS users can use the Community Outcomes Report (COR) in HIFIS for Section 4. Non-HIFIS users must develop an equivalent report to the Canadian methodology for Section 4.

Yes

Partnerships

OBA 16	Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of strengthening the Outcomes-Based Approach? Note: The response to this question is auto-populated from CHR 4(a).	Yes (Continuous improvement)
Data quality improvement		
OBA 17	a) Are efforts being made to improve data quality? b) How was data quality improved? Please provide specific examples. Your response could reference one or more dimensions of data quality: • Data uniqueness • Data consistency • Data timeliness • Data completeness • Data comprehensiveness	Yes
	In working towards confirmation of Quality By-Name Data for our total population of people experiencing homelessness as well as the sub-set of veteran's experiencing homelessness, we engaged in regular data reviews and aligning policies and practices to support the maintenance of robust, reliable data sets. We continue to fine tune how these practices are operationalized best to ensure the ongoing accuracy of our data and without over-burdening admin staff across the system. Regular reviews of data for accuracy and completeness occur with all service partners. New work flows have been established as the new HIFIS Diversion module starts to be used more widely in our system. HIFIS processes and key data points are being reviewed in an ongoing way to ensure data being collected by direct service staff is being done so correctly, in ways that limit burden to staff and participants, and enhance service delivery.	

Our community continues to triage data challenges encountered in HIFIS alongside HIFIS National partners and local Information Technology (IT) staff.

Reporting on other Community-Level Outcomes

CHR
11

a) Beyond the five mandatory core outcomes under Reaching Home, do you wish to include any additional monthly community-level outcomes for this CHR?

Reminder: Reporting on additional community-level outcomes is optional.

No

b) Beyond the five mandatory core outcomes under Reaching Home, do you wish to include any additional annual community-level outcomes for this CHR?

Reminder: Reporting on additional community-level outcomes is optional.

No

Section 3 Summary Tables

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **HIFIS Directive**.

	Completed	Started	Not Yet Started
Total	5	0	0

Homelessness Management Information System	Completed (score)	Completed (%)
Homelessness Management Information System (out of 5 points)	5	100%
All (out of 5 points)	5	100%

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **Outcomes-Based Approach Directive**.

Reminder: As per **HIFIS Minimum Requirement 1** and **Outcomes-Based Approach Minimum Requirement 1** under the Reaching Home directives, communities must meet all HIFIS and Outcomes-Based Approach minimum requirements by March 31, 2026.

	Completed	Started	Not Yet Started
Total	17	0	0

Outcomes-Based Approach	Completed (score)	Completed (%)
Data uniqueness (out of 3 points)	3	100%
Data consistency (out of 2 points)	2	100%
Data timeliness (out of 2 points)	2	100%

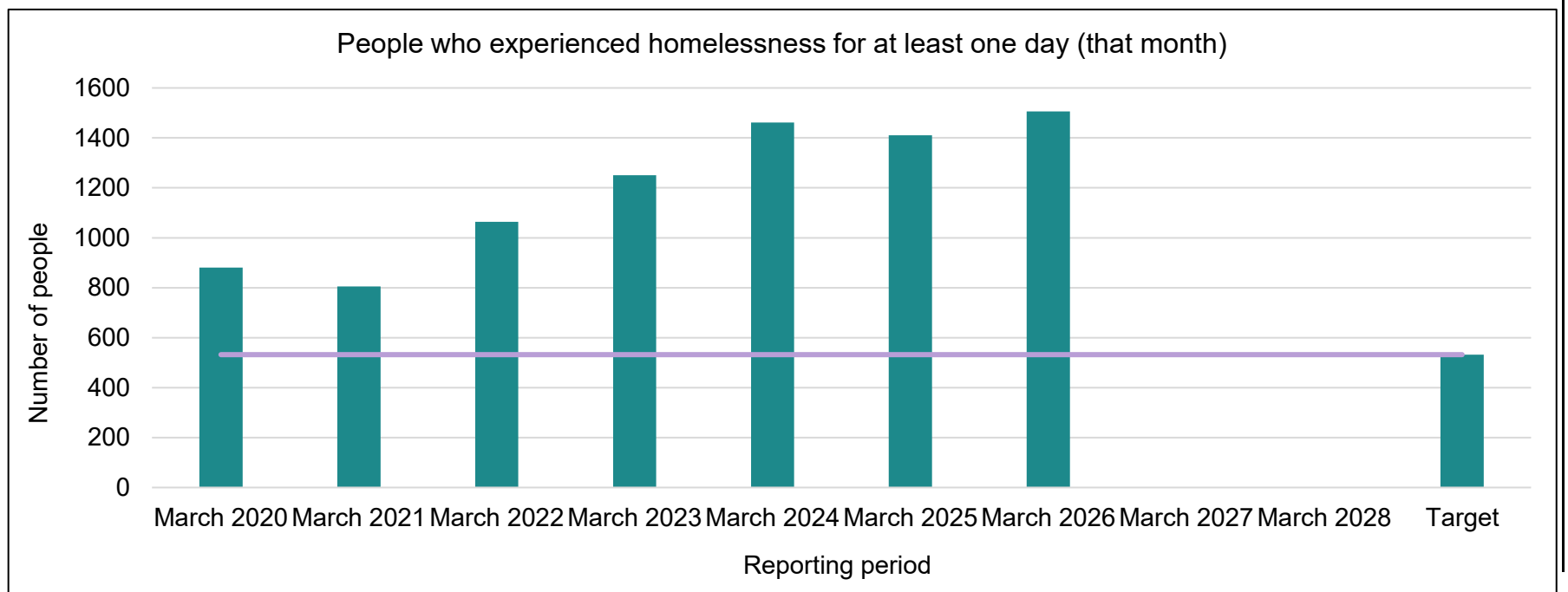
Data completeness (out of 2 points)	2	100%
Data comprehensiveness (out of 4 points)	4	100%
Data use (out of 2 points)	2	100%
Partnerships (out of 1 point)	1	100%
Data quality improvement (out of 1 point)	1	100%
All (out of 17 points)	17	100%

End of Section 3

SECTION 4: COMMUNITY-LEVEL OUTCOMES AND TARGETS

Using person-specific data to set baselines, set reduction targets and track progress – Monthly data

O1(M) Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #1 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
People who experienced homelessness for at least one day (that month)	881	805	1064	1250	1461	1410	1506			532



O1(M)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

March 2022

Overall homelessness will decrease by 50% between March 2022 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

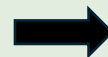
There is a significant increase in previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. After seeing a slight reduction (3%) from 2024 to 2025, from 2025 to 2026 we see a return to previous trend of an increase (7%) in the number of people who experienced homelessness for at least one day.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (**optional**):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

#N/A

In the comment box below, please add your data annotation for this period.

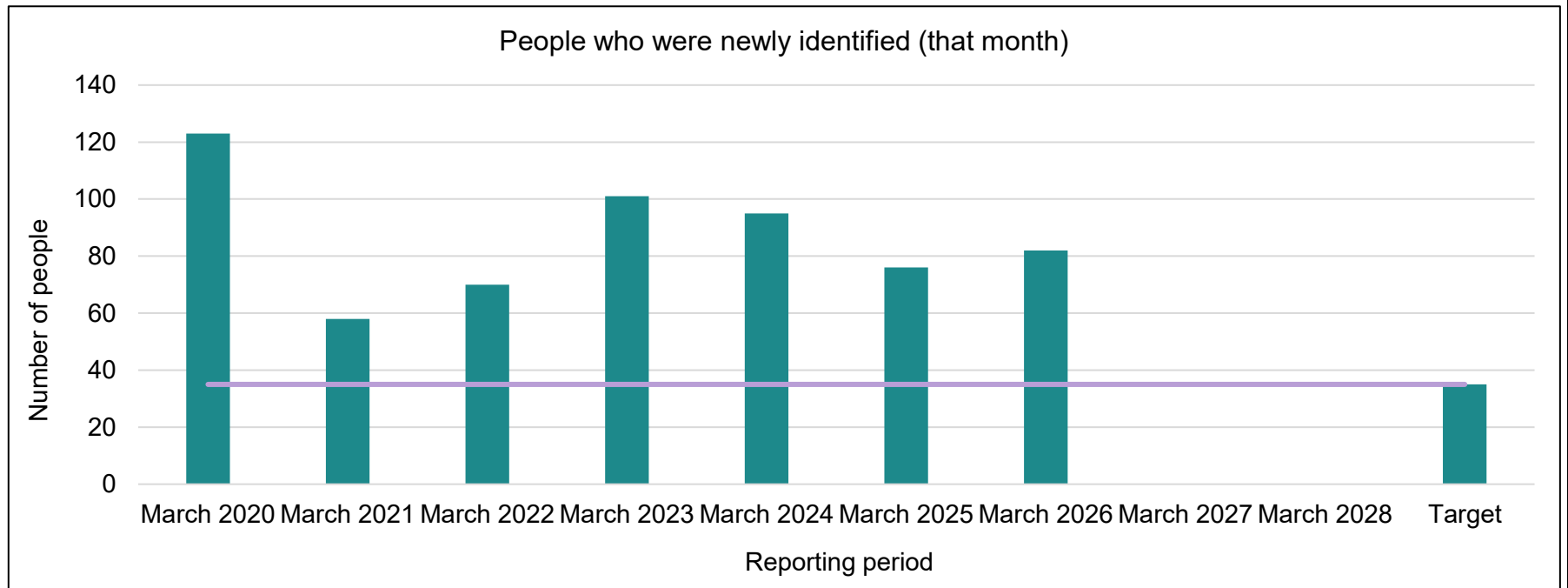
- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O2(M) Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)

Given your answers in Section 3, you can report monthly result(s) for Outcome #2 using your person-specific data.

	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
People who were newly identified (that month)	123	58	70	101	95	76	82			35



O2(M)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

March 2022

New inflows to homelessness will decrease by 50% between March 2022 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

There is a significant increase in previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Increases being observed between 2025 and 2026 are not in line with annualized data and counter to trend from past two years, meaning it could be an outlier month in 2026, or an indicator of a newly forming trend and return to increases in people who were newly identified.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (**optional**):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

#N/A

In the comment box below, please add your data annotation for this period.

- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O3(M) Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)

Given your answers in Section 3, you can report monthly result(s) for Outcome #3 using your person-specific data.

	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
Returns to homelessness (that month)	58	44	51	94	58	46	61			25



O3(M)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

March 2022

Returns to homelessness will decrease by 51% between March 2022 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

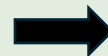
There is a significant increase in previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Increases from 2025 to 2026 indicate a need to monitor this data point further and ensure continued focus on eviction prevention through continued investments in the eviction prevention peer program and rent bank.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (**optional**):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

#N/A

In the comment box below, please add your data annotation for this period.

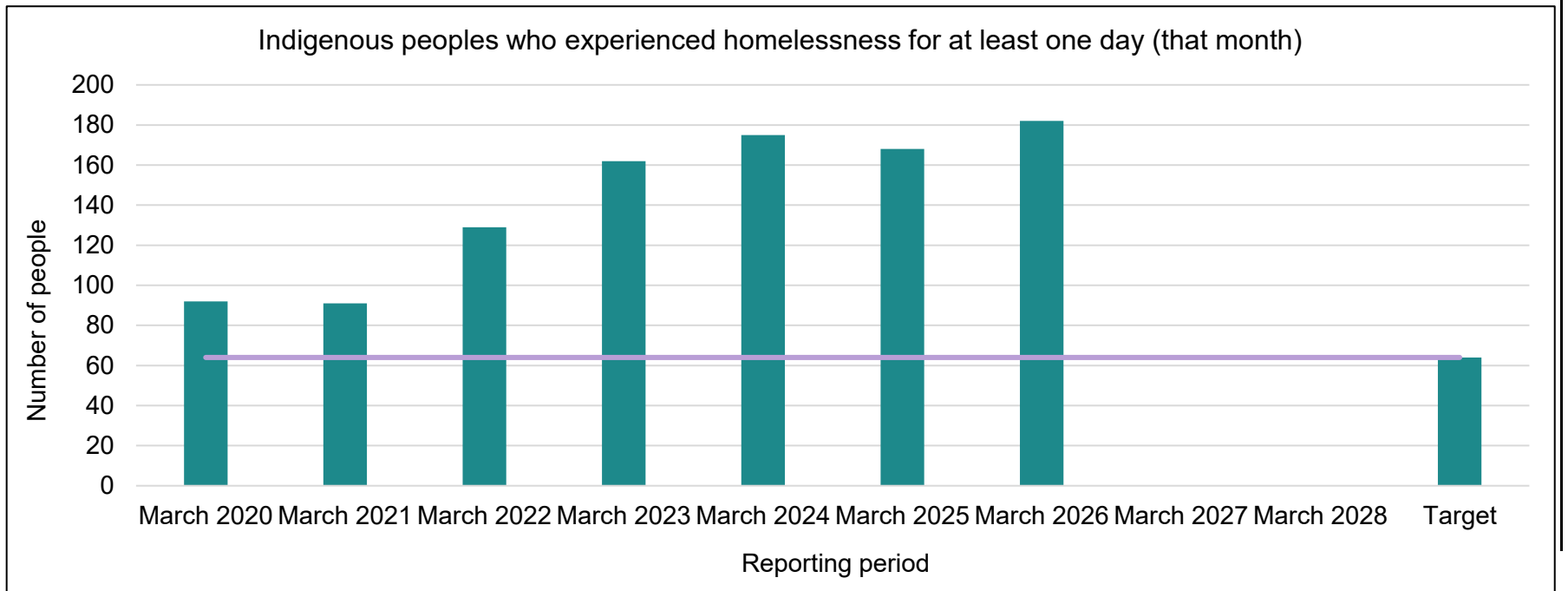
- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O4(M) Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)

Given your answers in Section 3, you can report monthly result(s) for Outcome #4 using your person-specific data.

	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
Indigenous peoples who experienced homelessness for at least one day (that month)	92	91	129	162	175	168	182			64



O4(M)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

March 2022

Indigenous homelessness will decrease by 50% between March 2022 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- As applicable, explain how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results.
- Optionally, provide any additional context on your data.

There is a significant increase in the previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Continued over-representation of and increases of experiences of Indigenous homelessness within our community highlights the need for continued partnership and action with Indigenous organizations.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (**optional**):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

To:

Select one



Select one

#N/A

In the comment box below, please add your data annotation for this period.

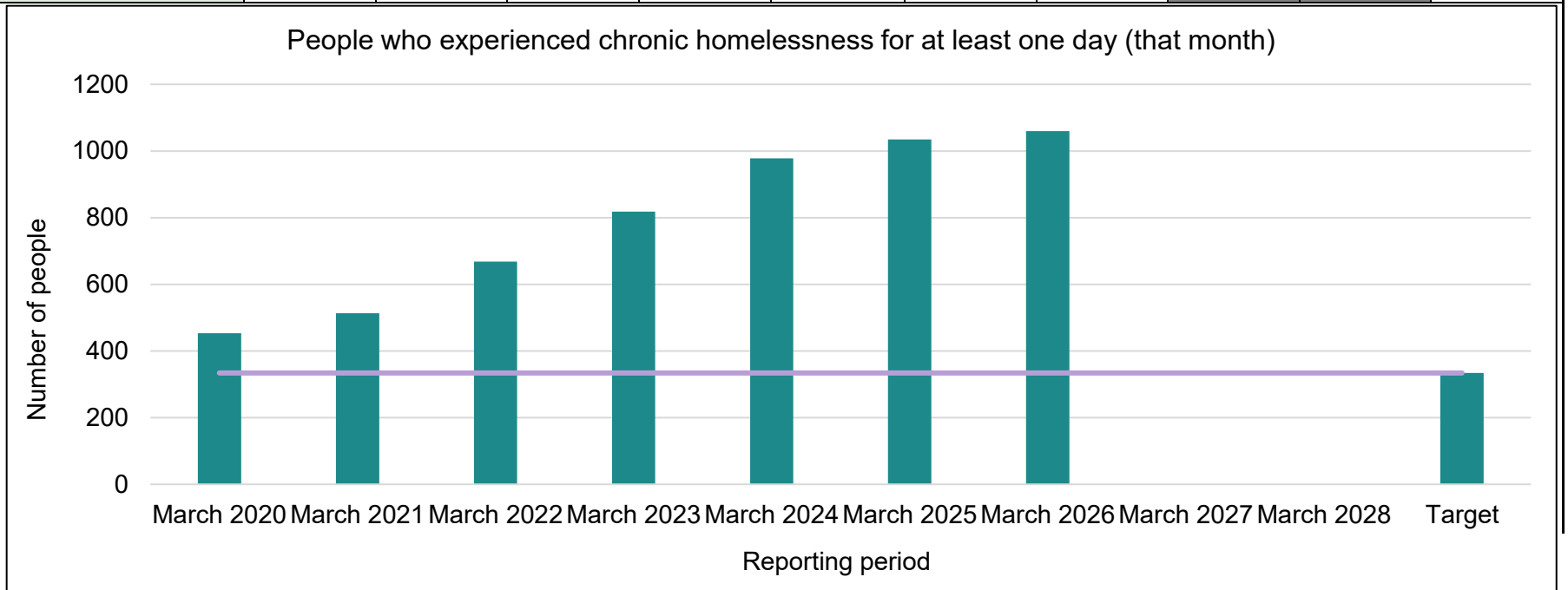
- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O5(M) Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)

Given your answers in Section 3, you can report monthly result(s) for Outcome #5 using your person-specific data.
 Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.

	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
People who experienced chronic homelessness for at least one day (that month)	453	513	668	818	978	1035	1060			334



O5(M)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

March 2022

Chronic homelessness will decrease by 50% between March 2022 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Within this CHR, there is a significant increase in data being reported for the first several years of the reporting period, and a smaller increase in the past two years compared to last year’s report. As a result, while maintaining the baseline year, the baseline number has increased. Continued increases in experiences of chronic homelessness is concerning and is being addressed through actions and investments as part of the Plan to End Chronic Homelessness.

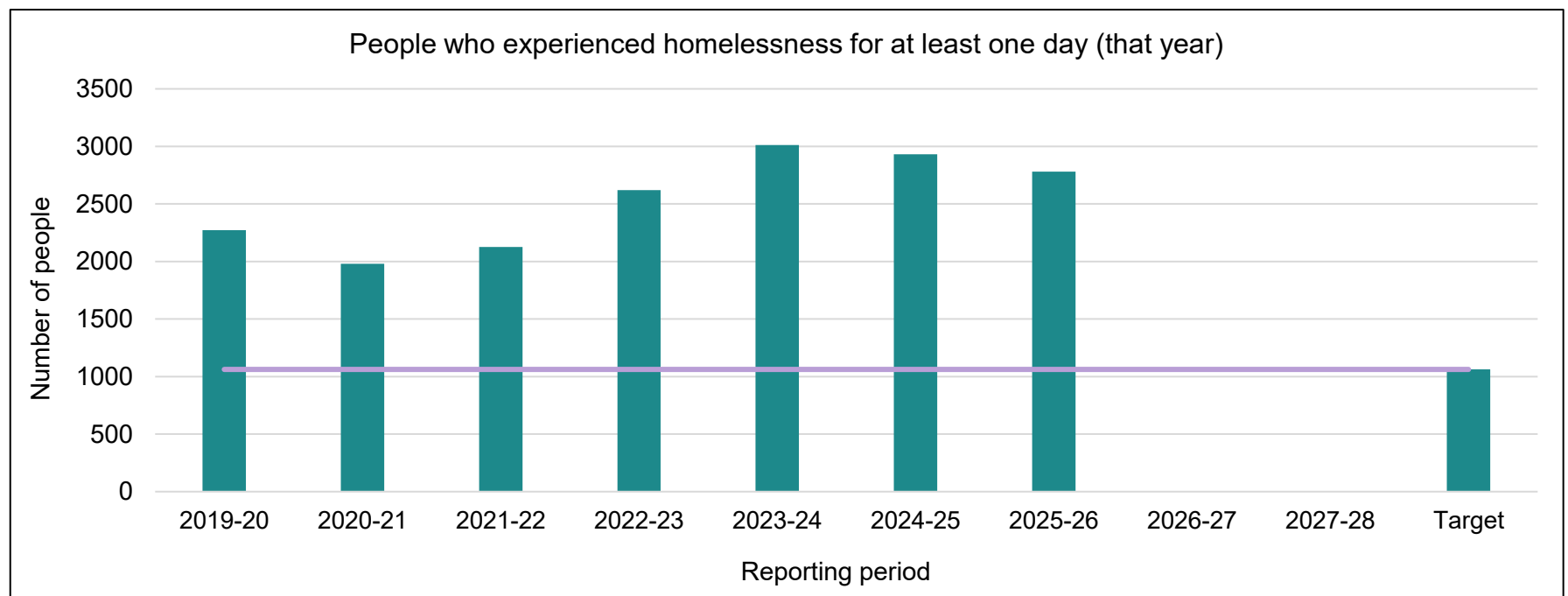
c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (**optional**):

Please select two reporting periods below for which you would like to add a data annotation for:

From:	To:
Select one	Select one
#N/A	
In the comment box below, please add your data annotation for this period. • As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).	
Please insert comments here	

Using person-specific data to set baselines, set reduction targets and track progress – Annual data

O1(A) Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)										
Given your answers in Section 3, you can report annual result(s) for Outcome #1 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People who experienced homelessness for at least one day (that year)	2273	1979	2125	2619	3013	2931	2780			1062



O1(A)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

2021-22

Overall homelessness will decrease by 50% between 2021-22 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

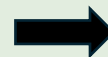
There is a significant increase in previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Decreases seen over the past two years is encouraging and can be explored further to identify possible causes.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (optional):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

#N/A

In the comment box below, please add your data annotation for this period.

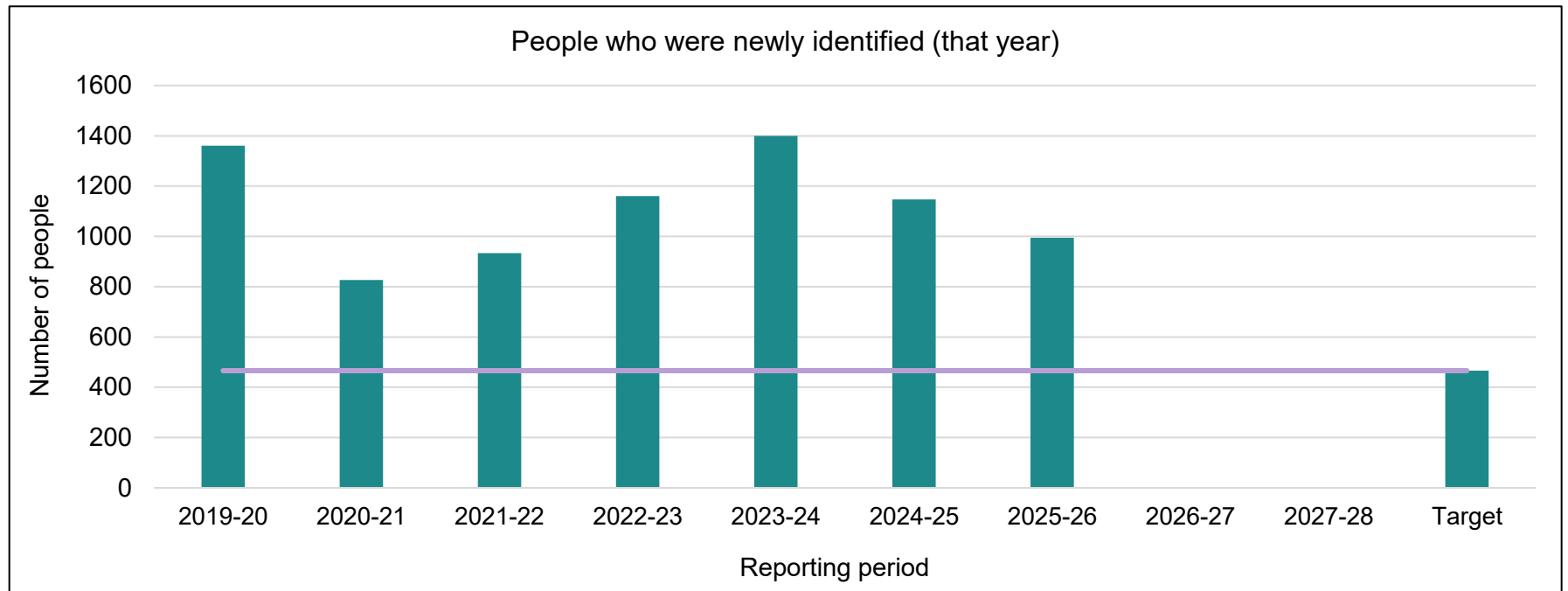
- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O2(A) Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)

Given your answers in Section 3, you can report annual result(s) for Outcome #2 using your person-specific data.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People who were newly identified (that year)	1360	826	933	1160	1400	1147	994			466



O2(A)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

2021-22

New inflows to homelessness will decrease by 50% between 2021-22 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

There is a significant increase in previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Decreases seen over the past two years is encouraging, though the decrease slowed between the 24-25 to 25-26 fiscal years compared to the decreased between the 23-24 to 24-25 fiscal years (18% to 13%).

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (optional):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

#N/A

In the comment box below, please add your data annotation for this period.

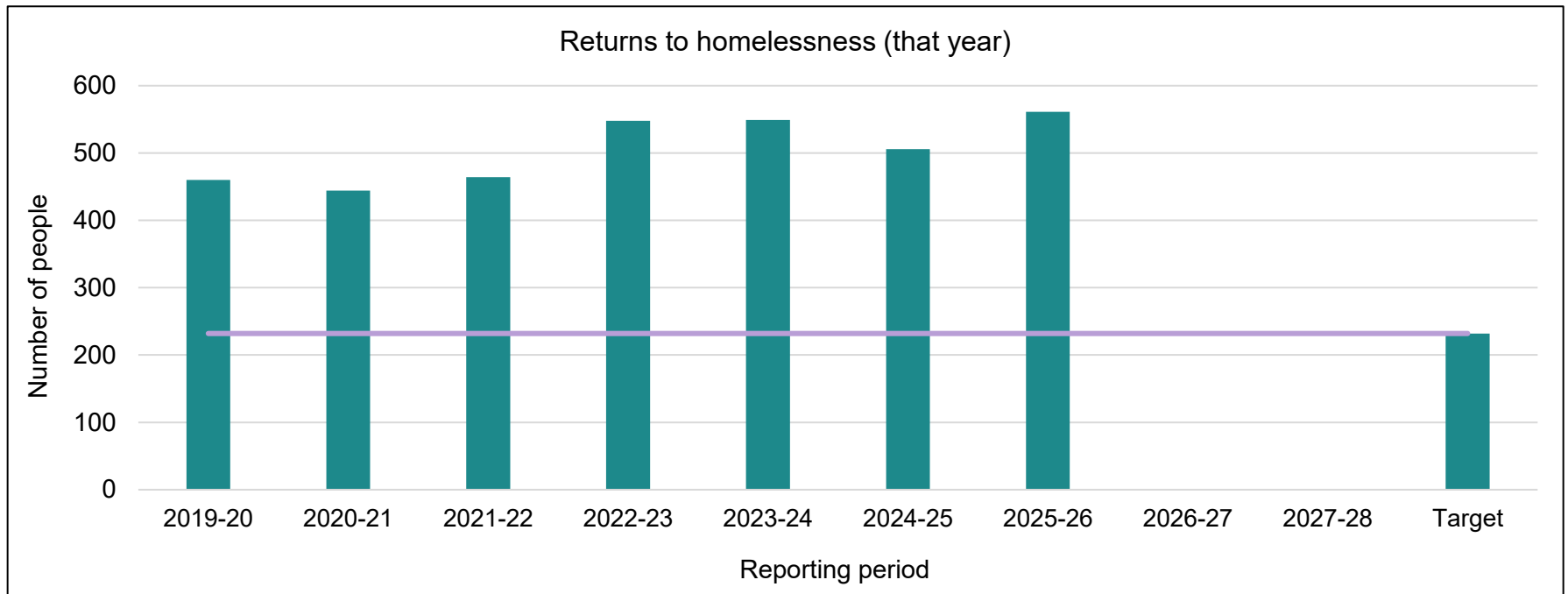
- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O3(A) Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)

Given your answers in Section 3, you can report annual result(s) for Outcome #3 using your person-specific data.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
Returns to homelessness (that year)	460	444	464	548	549	506	561			232



O3(A)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

2021-22

Returns to homelessness will decrease by 50% between 2021-22 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

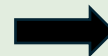
There is a significant increase in previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Increases from 2025 to 2026 indicate a need to monitor this data point further and ensure continued focus on eviction prevention through continued investments in the eviction prevention peer program and rent bank.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (optional):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

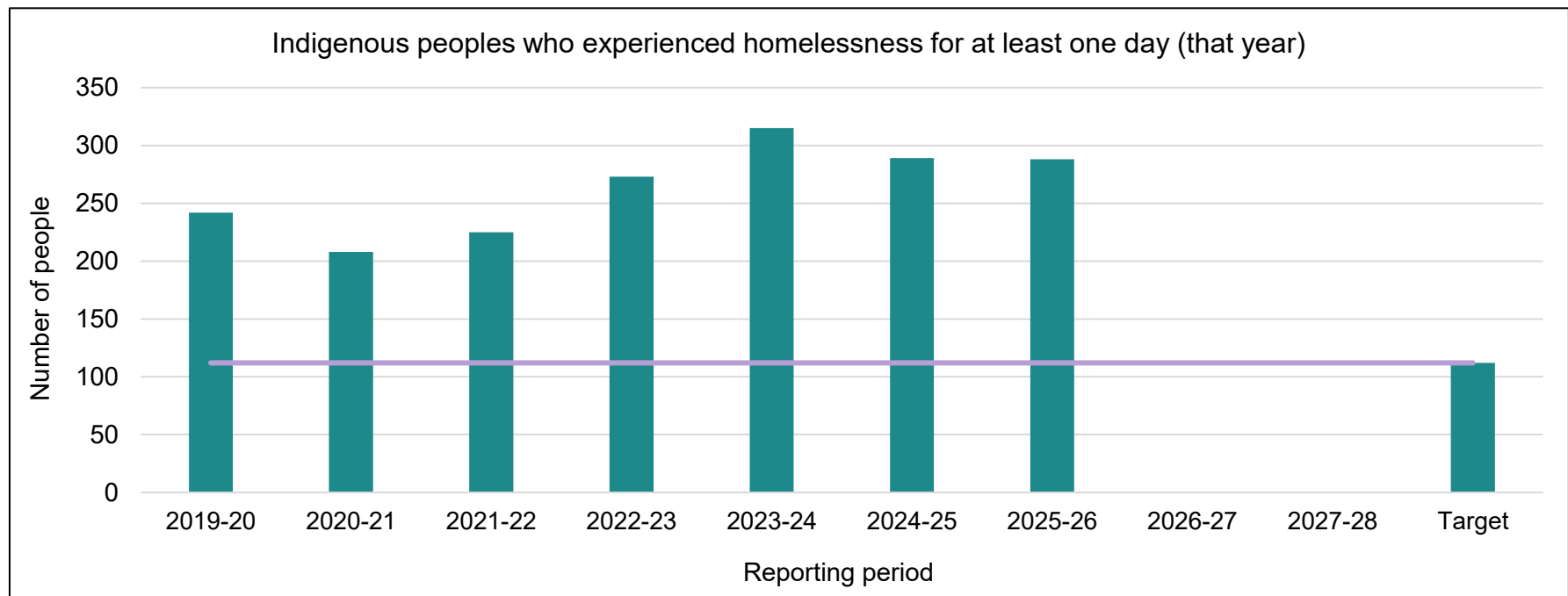
#N/A

In the comment box below, please add your data annotation for this period.

- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O4(A) Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)										
Given your answers in Section 3, you can report annual result(s) for Outcome #4 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
Indigenous peoples who experienced homelessness for at least one day (that year)	242	208	225	273	315	289	288			112



O4(A)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

2021-22

Indigenous homelessness will decrease by 50% between 2021-22 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of "N/A" for one or more data points. As a reminder, no cells should be left blank.
- As applicable, explain how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results.
- Optionally, provide any additional context on your data.

There is a significant increase in the previous year's data being reported in this CHR compared to the previous CHR (2024-25). As a result, while maintaining the baseline year, the baseline number has increased. Slowing of the decrease in numbers year-over-year indicates a need to track this data point more closely this year. Continued over-representation of experiences of Indigenous homelessness within our community highlights the need for continued partnership and action with Indigenous organizations.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (optional):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

To:

Select one



Select one

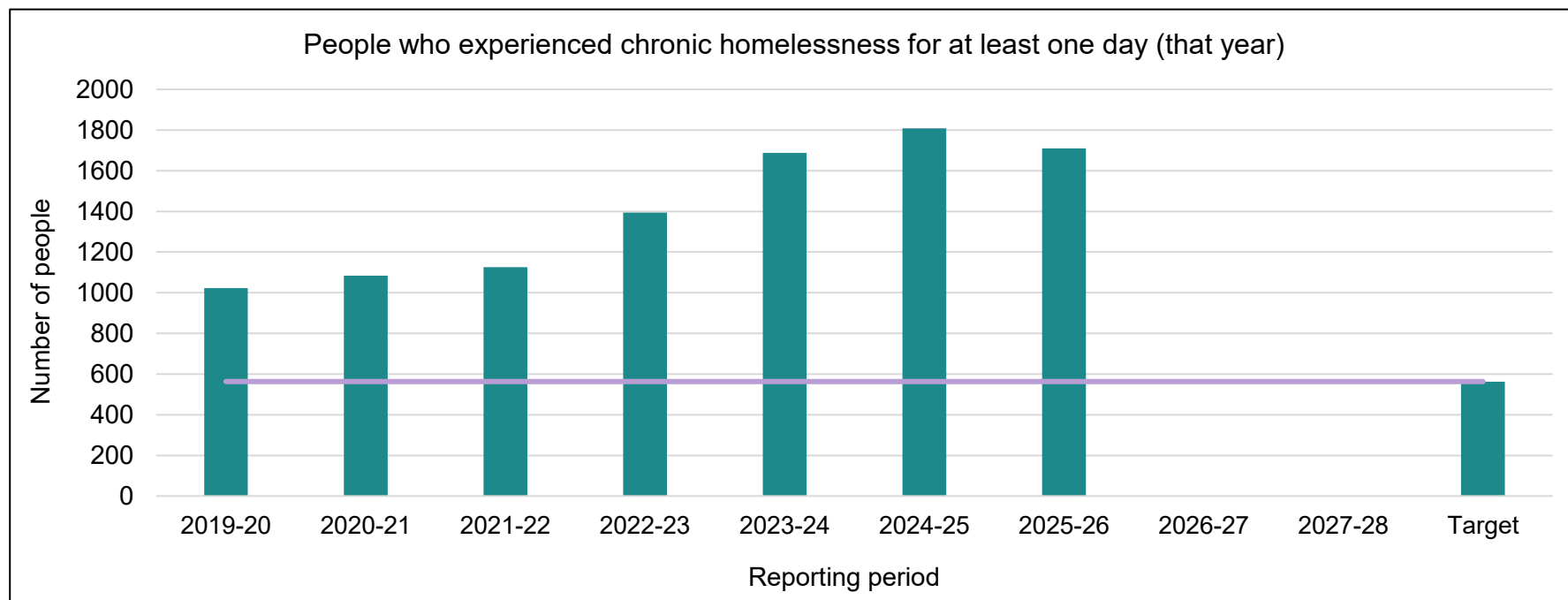
#N/A

In the comment box below, please add your data annotation for this period.

- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

O5(A) Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)										
<i>Given your answers in Section 3, you can report annual result(s) for Outcome #5 using your person-specific data.</i> <i>Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.</i>										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People who experienced chronic homelessness for at least one day (that year)	1022	1084	1126	1394	1688	1809	1709			563



O5(A)

a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.

2021-22

Chronic homelessness will decrease by 50% between 2021-22 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2024-25), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Within this CHR, there is a significant increase in data being reported for the first several years of the reporting period, and a smaller increase in the past two years compared to last year’s report. As a result, while maintaining the baseline year, the baseline number has increased. In the 2025-26 fiscal year, the number of people who experienced chronic homelessness for at least one day was 26% higher than the average from 2019-2025. While a slight decline (6%) between the 2024-25 and 2025-26 fiscal years is encouraging, continued large numbers of people experiencing chronic homelessness is concerning and is being addressed through actions and investments as part of the Plan to End Chronic Homelessness.

c) **Introducing Data Annotations** – where you can highlight trends and explore the reasons behind them (optional):

Please select two reporting periods below for which you would like to add a data annotation for:

From:

Select one



To:

Select one

#N/A

In the comment box below, please add your data annotation for this period.

- As applicable, please indicate the parameters which could have influenced the change during the selected period (e.g., significant events within the community, policy changes, data quality and comprehensiveness).

Please insert comments here

End of Section 4a